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PTO/SB/21 (08-00)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/900,503	
		Filing Date	July 6, 2001	
		First Named Inventor	HU, LAWRENCE W.	
		Group Art Unit	3732	
		Examiner Name	SMITH, JEFFREY A.	
Total Number of Pages in This Submission		20	Attorney Docket Number	GUID-012CON
ENCLOSURES (check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form (In duplicate) <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information		
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO form 1449 (10 pgs.) postcard		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm or Individual Name	ALAN W. CANNON, Reg. No. 34,977			
Signature				
Date	May 14, 2003			

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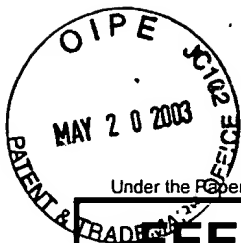
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FEE TRANSMITTAL for FY 2003		Complete if Known																																											
Patent fees are subject to annual revision.		Application Number	09/900,503																																										
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TOTAL AMOUNT OF PAYMENT (\$)		120.00																																											
METHOD OF PAYMENT		FEE CALCULATION (continued)																																											
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit overpayments to: Deposit Account Number 50-0815 Deposit Account Name Bozicevic, Field & Francis LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES																																											
2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																													
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2. BASIC FILING FEE																																													
<table border="1"><thead><tr><th>Large Fee Code</th><th>Entity (\$)</th><th>Small Fee Code</th><th>Entity (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td></td></tr><tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr><tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr><tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr><tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5">SUBTOTAL (1)</td><td>0.00</td></tr></tbody></table>		Large Fee Code	Entity (\$)	Small Fee Code	Entity (\$)	Fee Description	Fee Paid	101	740	201	370	Utility filing fee		106	330	206	165	Design filing fee		107	510	207	255	Plant filing fee		108	740	208	370	Reissue filing fee		114	160	214	80	Provisional filing fee		SUBTOTAL (1)					0.00		
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SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Alan W. Cannon	Registration No. (Attorney/Agent)	34,977	Telephone	(408) 736-3554
Signature		Date	05/14/2003		

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